

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

Graham for Congress

ADDRESS (number and street)

PO Box 310

Check if different
than previously
reported. (ACC)

Tallahassee

FL

32302

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C

C00543249

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

STATE ▼ DISTRICT

FL

02

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the
State of

5. Covering Period

M M /

D D /

Y Y Y Y

through

M M /

D D /

Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Logan, Mark, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Logan, Mark, , ,

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

04

14

2017

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

Office
Use
Only**FEC FORM 3**
(Revised 05/2016)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 2 / 11

Write or Type Committee Name
Graham for Congress

Report Covering the Period:

From:

M M / D D / Y Y Y Y
01 / 01 / 2017

To:

M M / D D / Y Y Y Y
03 / 31 / 2017

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	0.00	0.00
(b) Total Contribution Refunds (from Line 20(d))	250.00	250.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	-250.00	-250.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	2846.74	22239.78
(b) Total Offsets to Operating Expenditures (from Line 14)	31.00	31.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	2815.74	22208.78
8. Cash on Hand at Close of Reporting Period (from Line 27)	1001666.50	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

16. **TOTAL RECEIPTS** (add Lines 11(e), 12, 13(c), 14, and 15)
(Carry Total to Line 24, page 4).....

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 11

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	2846.74	22239.78
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	250.00	250.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	250.00	250.00
21. OTHER DISBURSEMENTS	252000.00	252000.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	255096.74	274489.78

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1256115.61
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	647.63
25. SUBTOTAL (add Line 23 and Line 24).....	1256763.24
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	255096.74
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1001666.50

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 5 OF 11

☐ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☒ 15

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NAME OF COMMITTEE (In Full)
Graham for Congress

A. Full Name (Last, First, Middle Initial)
Capital One

Mailing Address 1680 Capital One Tower Dr

City Mc Lean	State VA	Zip Code 22102
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
------------------	------------

Receipt For: 2018
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 846.23

Date of Receipt

M M / D D / Y Y Y Y Y Y
 01 / 05 / 2017

Transaction ID : VN8HXE3YMM8

Amount of Each Receipt this Period

258.14

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
Capital One

Mailing Address 1680 Capital One Tower Dr

City Mc Lean	State VA	Zip Code 22102
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
------------------	------------

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 953.30

Date of Receipt

M M / D D / Y Y Y Y Y Y
 01 / 31 / 2017

Transaction ID : VN8HXE5ZW09

Amount of Each Receipt this Period

107.07

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
Capital One

Mailing Address 1680 Capital One Tower Dr

City Mc Lean	State VA	Zip Code 22102
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
------------------	------------

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 1113.90

Date of Receipt

M M / D D / Y Y Y Y Y Y
 02 / 06 / 2017

Transaction ID : VN8HXE60862

Amount of Each Receipt this Period

160.60

☐ Memo Item

525.81

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 11

☐ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☒ 15

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NAME OF COMMITTEE (In Full)
Graham for Congress

A. Full Name (Last, First, Middle Initial) Capital One			Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 13 / 2017	
Mailing Address 1680 Capital One Tower Dr			Transaction ID : VN8HXE60846	
City Mc Lean	State VA	Zip Code 22102	Amount of Each Receipt this Period 1.61	
FEC ID number of contributing federal political committee. C		Memo Item <input type="checkbox"/>		
Name of Employer		Occupation		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1115.51		

B. Full Name (Last, First, Middle Initial)			Date of Receipt M M / D D / Y Y Y Y Y Y	
Mailing Address			Amount of Each Receipt this Period	
City	State	Zip Code	Memo Item <input type="checkbox"/>	
FEC ID number of contributing federal political committee. C		Election Cycle-to-Date ▼		
Name of Employer		Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼		

C. Full Name (Last, First, Middle Initial)			Date of Receipt M M / D D / Y Y Y Y Y Y	
Mailing Address			Amount of Each Receipt this Period	
City	State	Zip Code	Memo Item <input type="checkbox"/>	
FEC ID number of contributing federal political committee. C		Election Cycle-to-Date ▼		
Name of Employer		Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼		

SUBTOTAL of Receipts This Page (optional).....	1.61
TOTAL This Period (last page this line number only).....	527.42

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 7 OF 11

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Graham for Congress

Full Name (Last, First, Middle Initial)

A. Blue State DigitalMailing Address 101 Avenue of the Americans
12th FloorCity
New YorkState
NYZip Code
10013Purpose of Disbursement
Software

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		17		2017

FEC Identification Number

C

Amount of Each Disbursement this Period

650.00

Transaction ID : VN7JN9WPAT4

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Cube Smart

Mailing Address 7963 Apalachee Pkwy

City
TallahasseeState
FLZip Code
32311-3461Purpose of Disbursement
Storage Unit Rental

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		03		2017

FEC Identification Number

C

Amount of Each Disbursement this Period

422.19

Transaction ID : VN7JN9WPAB8

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Internal Revenue Service (IRS)

Mailing Address Internal Revenue Service Ctr

City
AndoverState
MAZip Code
05501-0001Purpose of Disbursement
Tax Filing

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		14		2017

FEC Identification Number

C

Amount of Each Disbursement this Period

641.65

Transaction ID : VN7JN9WPAS6

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1713.84

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 8 OF 11

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

Graham for Congress

Full Name (Last, First, Middle Initial)

A. Media TempleMailing Address 8520 National Blvd
ACity
Culver CityState
CAZip Code
90232-2418Purpose of Disbursement
Website Services

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	3		2	0	1	7

FEC Identification Number

C

Amount of Each Disbursement this Period

130.00

Transaction ID : VN7JN9WJ5R5

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Media TempleMailing Address 8520 National Blvd
ACity
Culver CityState
CAZip Code
90232-2418Purpose of Disbursement
Website Services

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	3		2	0	1	7

FEC Identification Number

C

Amount of Each Disbursement this Period

130.00

Transaction ID : VN7JN9WPAC3

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Media TempleMailing Address 8520 National Blvd
ACity
Culver CityState
CAZip Code
90232-2418Purpose of Disbursement
Website Services

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	3		2	0	1	7

FEC Identification Number

C

Amount of Each Disbursement this Period

130.00

Transaction ID : VN7JN9WPAQ0

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

390.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 9 OF 11

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Graham for Congress

Full Name (Last, First, Middle Initial)

A. NGP VAN, Inc.Mailing Address 1101 15th St NW
Ste 500City
WashingtonState
DCZip Code
20005-5006Purpose of Disbursement
Software

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
02	10	2017

FEC Identification Number

C

Amount of Each Disbursement this Period

300.00

Transaction ID : VN7JN9WPAJ1

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Paychex

Mailing Address 911 Panorama Trl S

City
RochesterState
NYZip Code
14625-2311Purpose of Disbursement
Payroll - Invoice

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
02	10	2017

FEC Identification Number

C

Amount of Each Disbursement this Period

186.00

Transaction ID : VN7JN9WPAH3

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Sandler, Reiff, Lamb, Rosenstein & Birkenstock, PCMailing Address 1025 Vermont Ave NW
Ste 300City
WashingtonState
DCZip Code
20005-6302Purpose of Disbursement
Legal Services

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
02	09	2017

FEC Identification Number

C

Amount of Each Disbursement this Period

105.00

Transaction ID : VN7JN9WPAG5

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

591.00

TOTAL This Period (last page this line number only).....▶

2694.84

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 10 OF 11

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Graham for Congress

Full Name (Last, First, Middle Initial)

A. Jasinski, Richard, S., ,

Mailing Address 16320 SW 11th St

City
Pembroke PinesState
FLZip Code
33027-5114Purpose of Disbursement
Contribution Refund

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	7		2	0	1	7

FEC Identification Number

C

Amount of Each Disbursement this Period

250.00

Transaction ID : VN7JN9WPA99

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

250.00

TOTAL This Period (last page this line number only).....▶

250.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 11 OF 11

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Graham for Congress

Full Name (Last, First, Middle Initial)

A. Bill Nelson for U.S. Senate

Mailing Address 972 W Whitmire Dr

Date of Disbursement

M M	D D	Y Y Y Y
02	09	2017

City
MelbourneState
FLZip Code
32935-6972

FEC Identification Number

C C00344051

Purpose of Disbursement
Contribution

Candidate Name

Nelson, Bill, , ,

Category/
Type

Amount of Each Disbursement this Period

2000.00

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID : VN7JN9WPAF7

☐ Memo Item

State: FL District: 00

Full Name (Last, First, Middle Initial)

B. Our Florida

Mailing Address 315 S Calhoun St

Date of Disbursement

M M	D D	Y Y Y Y
02	03	2017

City
TallahasseeState
FLZip Code
32301-1834

FEC Identification Number

C

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

250000.00

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID : VN7JN9WPAD1

☐ Memo Item

State:

District:

Full Name (Last, First, Middle Initial)

C.

Mailing Address

Date of Disbursement

M M	D D	Y Y Y Y

City

State

Zip Code

FEC Identification Number

C

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼
☐ Memo Item

State:

District:

SUBTOTAL of Disbursements This Page (optional).....▶

252000.00

TOTAL This Period (last page this line number only).....▶

252000.00